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FORM**

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Total Number of Pages in This Submission

2

Application Number

09/626,535

Filing Date

07-27-2000

First Named Inventor

Donald Hooper

Art Unit

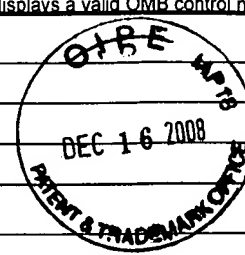
2455

Examiner Name

David Y. Eng

Attorney Docket Number

P7876X

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

If necessary, please charge fees or credit overpayment to Deposit Account No. 50-0221.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature	/Robert A. Greenberg/		
Printed name	Robert A. Greenberg		
Date	December 10, 2008	Reg. No.	44,133

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	/Christine Hartness/		
Typed or printed name	Christine Hartness	Date	December 10, 2008

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Hooper Art Unit : 2455
Serial No. : 09/626,535 Examiner : Eng, David Y.
Filed : 07/27/2000 Assignee : Intel Corporation
Title : MULTI-THREADED SCHEDULED RECEIVE FOR FAST NETWORK
PORT DATA

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Response to Restriction Requirement Mailed 11/13/08

In response to the restriction requirement mailed 11/13/08, Attorney for Applicant elects **Group II, claims 7-17 and 21**, without traverse.

If any fees are due, please apply such fees to Deposit Account No. 50-0221.

Respectfully submitted,

Dated: 12/10/08 /Robert A. Greenberg/

Robert A. Greenberg
Reg. No. 44,133
Attorney for Intel®
(978) 553-2060